PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2003  Application or Docket Number  3 7/82-19												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								MALL I	ENTITY	OR	OTHER	
TOTAL CLAIMS			2					RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED .		NUMBER EXTRA			BASIC FE	€ 385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			7 minus 20=		-			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 = * -			<b>&gt;</b>	X43=		<del> </del>	1	You	
ML	ILTIPLE DEPE	NDENT CLAIM P	RESENT				-			OR		
• If	the difference	e in column 1 is	less than zero, enter "0" in column 2				Ľ	+145=	200	OR	+290=	
								TOTAL	385	OR	TOTAL	
G-	CLAIMS AS AMENDED - PART II  (Column 2) (Column 3)							SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 10	Minus	- 2	O			X\$ 9=		OR	X\$18=	
	Independent	· 2	Minus	***	3	=/		X43=		OR	X86=	·
1	FIRST PRESENTATION OF MULTIPLE DEPENDE				CLAIM			. 1.45	<del>                                     </del>		.200	
							L	+145= TOTAL		OR	+290= TOTAL	
	(Column 1) (Column 2) (Column 3)							DOIT. FEE	•	OR	ADDIT. FEE	
AMENOMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIO PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	·
	Independent	•	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							 -145=			. 200	
							Ľ	TOTAL		OR	+290= TOTAL	
							AD	DIT. FEE		OR	ADDIT. FEE	
		(Column 1) CLAIMS	·	(Colum HIGHE		(Column 3)			400:			
MEN		REMAINING : AFTER AMENDMENT	٠.	PREVIOUS PAID FO	USLY	PRESENT EXTRA	L	RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	>	<b>(\$ 9=</b>		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							145				
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290= TOTAL	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEEOR ADDIT.												
n	ne "Highest Num	ber Previously Paid	For (Total or	Independen	nt) is the	highest number	found	in the app	ropriate box	in colu	imn 1.	

FORM PTO-875 (Rev. 10/03)

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